

|   |  |                         |   |
|---|--|-------------------------|---|
| <b>Index of Claims</b><br> |  | Application/Control No. | Applicant(s)/Patent Under Reexamination |
|   |  | 10814991                | ALDRICH ET AL.                          |
|   |  | Examiner                | Art Unit                                |
|   |  | KASSA, YOSEF            | 2624                                    |

|   |          |   |            |   |              |   |          |
|---|----------|---|------------|---|--------------|---|----------|
| ✓ | Rejected | - | Cancelled  | N | Non-Elected  | A | Appeal   |
| = | Allowed  | ÷ | Restricted | I | Interference | O | Objected |

Claims renumbered in the same order as presented by applicant  CPA  T.D.  R.1.47

| CLAIM |          | DATE       |  |  |  |  |  |  |  |  |  |
|-------|----------|------------|--|--|--|--|--|--|--|--|--|
| Final | Original | 09/19/2007 |  |  |  |  |  |  |  |  |  |
| 1     | 1        | =          |  |  |  |  |  |  |  |  |  |
| 2     | 2        | =          |  |  |  |  |  |  |  |  |  |
| 3     | 3        | =          |  |  |  |  |  |  |  |  |  |
| 4     | 4        | =          |  |  |  |  |  |  |  |  |  |
| 5     | 5        | =          |  |  |  |  |  |  |  |  |  |
| 6     | 6        | =          |  |  |  |  |  |  |  |  |  |
| 7     | 7        | =          |  |  |  |  |  |  |  |  |  |
| 8     | 8        | =          |  |  |  |  |  |  |  |  |  |
| 9     | 9        | =          |  |  |  |  |  |  |  |  |  |
| 10    | 10       | =          |  |  |  |  |  |  |  |  |  |
| 11    | 11       | =          |  |  |  |  |  |  |  |  |  |
| 12    | 12       | =          |  |  |  |  |  |  |  |  |  |
| 13    | 13       | =          |  |  |  |  |  |  |  |  |  |
| 14    | 14       | =          |  |  |  |  |  |  |  |  |  |
| 15    | 15       | =          |  |  |  |  |  |  |  |  |  |
| 16    | 16       | =          |  |  |  |  |  |  |  |  |  |
| 17    | 17       | =          |  |  |  |  |  |  |  |  |  |
| 18    | 18       | =          |  |  |  |  |  |  |  |  |  |
| 19    | 19       | =          |  |  |  |  |  |  |  |  |  |
| 20    | 20       | =          |  |  |  |  |  |  |  |  |  |
| 21    | 21       | =          |  |  |  |  |  |  |  |  |  |
| 22    | 22       | =          |  |  |  |  |  |  |  |  |  |
| 23    | 23       | =          |  |  |  |  |  |  |  |  |  |
| 24    | 24       | =          |  |  |  |  |  |  |  |  |  |
| 25    | 25       | =          |  |  |  |  |  |  |  |  |  |
| 26    | 26       | =          |  |  |  |  |  |  |  |  |  |
| 27    | 27       | =          |  |  |  |  |  |  |  |  |  |
| 28    | 28       | =          |  |  |  |  |  |  |  |  |  |
| 29    | 29       | =          |  |  |  |  |  |  |  |  |  |
|       | 30       | -          |  |  |  |  |  |  |  |  |  |
|       | 31       | -          |  |  |  |  |  |  |  |  |  |
|       | 32       | -          |  |  |  |  |  |  |  |  |  |
|       | 33       | -          |  |  |  |  |  |  |  |  |  |
|       | 34       | -          |  |  |  |  |  |  |  |  |  |
|       | 35       | -          |  |  |  |  |  |  |  |  |  |
|       | 36       | -          |  |  |  |  |  |  |  |  |  |

|   |                         |   |
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|                                     |                 |                          |                   |                          |                     |                          |                 |
|-------------------------------------|-----------------|--------------------------|-------------------|--------------------------|---------------------|--------------------------|-----------------|
| <input checked="" type="checkbox"/> | <b>Rejected</b> | <input type="checkbox"/> | <b>Cancelled</b>  | <input type="checkbox"/> | <b>Non-Elected</b>  | <input type="checkbox"/> | <b>Appeal</b>   |
| <input type="checkbox"/>            | <b>Allowed</b>  | <input type="checkbox"/> | <b>Restricted</b> | <input type="checkbox"/> | <b>Interference</b> | <input type="checkbox"/> | <b>Objected</b> |

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| CLAIM |          | DATE       |  |  |  |  |  |  |  |  |  |
|-------|----------|------------|--|--|--|--|--|--|--|--|--|
| Final | Original | 09/19/2007 |  |  |  |  |  |  |  |  |  |
|       | 37       | -          |  |  |  |  |  |  |  |  |  |
|       | 38       | -          |  |  |  |  |  |  |  |  |  |